

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS				1. Requisition Number SEE SCHEDULE		Page 1 Of 4	
Offeror To Complete Block 12, 17, 23, 24, & 30							
2. Contract No. DAAE20-03-D-0078		3. Award/Effective Date 2003AUG27		4. Order Number 0004		5. Solicitation Number	
6. Solicitation Issue Date							
7. For Solicitation Information Call:		A. Name CYNTHIA CHELSTROM		B. Telephone Number (No Collect Calls) (309)782-3718		8. Offer Due Date/Local Time	
9. Issued By TACOM-ROCK ISLAND AMSTA-LC-CTT-M ROCK ISLAND IL 61299-7630 e-mail: CHELSTROMC@RIA.ARMY.MIL		Code W52H09 10. This Acquisition Is <input checked="" type="checkbox"/> Unrestricted <input type="checkbox"/> Set Aside: % For <input type="checkbox"/> Small Business <input type="checkbox"/> Small Disadv Business <input type="checkbox"/> 8(A) SIC: Size Standard:		11. Delivery For FOB Destination Unless Block Is Marked <input type="checkbox"/> See Schedule <input checked="" type="checkbox"/> 13a. This Contract Is A Rated Order Under DPAS (18 CFR 700) 13b. Rating DOA5 14. Method Of Solicitation <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP		12. Discount Terms	
15. Deliver To SR W0K8 USA MAC ROCK ISL ARSENAL BLDG 299 GILLESPIE AV AND BECK LANE ROCK ISLAND IL 61299-5000		Code W52H1C		16. Administered By DCMA MARYLAND 217 EAST REDWOOD ST SUITE 1800 BALTIMORE MD 21202-5299		Code S2101A	
Telephone No.							
17. Contractor/Offeror MATTEI COMPRESSORS, INC GROUP 9635 LIBERTY ROAD RANDALLSTOWN, MD. 21133-2436		Code OJCW2 Facility		18a. Payment Will Be Made By DFAS COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P O BOX 182264 COLUMBUS OH 43218-2264		Code HQ0338	
Telephone No.							
<input type="checkbox"/> 17b. Check If Remittance Is Different And Put Such Address In Offer		18b. Submit Invoices To Address Shown In Block 18a Unless Block Below Is Checked <input type="checkbox"/> See Addendum					
19. Item No.	20. Schedule Of Supplies/Services			21. Quantity	22. Unit	23. Unit Price	24. Amount
	SEE SCHEDULE						
(Attach Additional Sheets As Necessary)							
25. Accounting And Appropriation Data ACRN: AA 21 12035000016D6D02P53450531E9 S11116 W52H09						26. Total Award Amount (For Govt. Use Only) \$5,631.96	
<input type="checkbox"/> 27a. Solicitation Incorporates By Reference FAR 52.212-1, 52.212-4. FAR 52.212-3 And 52.212-5 Are Attached.						<input type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.	
<input checked="" type="checkbox"/> 27b. Contract/Purchase Order Incorporates By Reference FAR 52.212-4. FAR 52.212-5 Is Attached. Addenda						<input checked="" type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.	
28. Contractor Is Required To Sign This Document And Return _____ Copies <input type="checkbox"/> To Issuing Office. Contractor Agrees To Furnish And Deliver All Items Set Forth Or Otherwise Identified Above And On Any Additional Sheets Subject To The Terms And Conditions Specified Herein.				29. Award Of Contract: Reference _____ Offer <input type="checkbox"/> Dated _____. Your Offer On Solicitation (Block 5) Including Any Additions Or Changes Which Are Set Forth Herein Is Accepted As To Items:			
30a. Signature Of Offeror/Contractor				31a. United States Of America (Signature Of Contracting Officer)			
30b. Name And Title Of Signer (Type Or Print)		30c. Date Signed		31b. Name Of Contracting Officer (Type Or Print) DONNA L WEBB /SIGNED/ WEBBD@RIA.ARMY.MIL (309)782-6369		31c. Date Signed	
32a. Quantity In Column 21 Has Been <input type="checkbox"/> Received <input type="checkbox"/> Inspected <input type="checkbox"/> Accepted And Conforms To The Contract Except As Noted				33. Ship Number <input type="checkbox"/> Partial <input type="checkbox"/> Final		34. Voucher Number	
32b. Signature Of Authorized Government Representative				32c. Date		35. Amount Verified Correct For	
41a. I Certify This Account Is Correct And Proper For Payment 41b. Signature And Title Of Certifying Officer				36. Payment <input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final		37. Check Number	
				38. S/R Account Number		39. S/R Voucher Number	
				42a. Received By (Print)		40. Paid By	
				42b. Received At (Location)			
				42c. Date Recd (YYMMDD)		42d. Total Containers	

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Standard Form 1449 (10-95)
Prescribed By GSA-FAR (4.8 CFR) 53.212

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN DAAE20-03-D-0078/0004 MOD/AMD	Page 2 of 4
Name of Offeror or Contractor: MATTEI COMPRESSORS, INC GROUP		

SUPPLEMENTAL INFORMATION

THE PURPOSE OF DELIVERY ORDER 0004 IS TO AWARD 6 EACH AIR COMPRESSORS, NSN: 4310-01-432-9655.

THE UNIT PRICE OF \$938.66 REFLECTS THE UNIT PRICE FOR ODERING PERIOD 1.

TOTAL DOLLAR VALUE OF THIS DELIVERY ORDER IN \$5,631.96.

PLEASE REMEMBER TO ADD THE FOLLOWING (PER MODIFICATION P00001, ITEM #3) TO THE SHIPPING LABEL:

ATTN: CMTH MANAGER

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED.

*** END OF NARRATIVE A 001 ***

Name of Offeror or Contractor: MATTEI COMPRESSORS, INC GROUP

CONTRACT ADMINISTRATION DATA

								JOB		
LINE	PRON/	OBLG						ORDER	ACCOUNTING	OBLIGATED
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>				<u>NUMBER</u>	<u>STATION</u>	<u>AMOUNT</u>
0001AF	M11B5346M1	AA	2	21	12035000016D6D02P53450531E9	S11116		17A346	W52H09	\$ 5,631.96
53450532147										
									TOTAL	\$ 5,631.96
SERVICE								ACCOUNTING		
<u>NAME</u>	<u>TOTAL BY ACRN</u>		<u>ACCOUNTING CLASSIFICATION</u>					<u>STATION</u>	<u>AMOUNT</u>	
Army	AA		21	12035000016D6D02P53450531E9	S11116			W52H09	\$ 5,631.96	
									TOTAL	\$ 5,631.96